

WATER QUALITY IMPACT EVALUATION CHECKLIST

PART 1: PROJECT INFORMATION

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| Project Name: | Reconstruction of Old Lake Wilson Road (CR 545) Widening Project Development and Environment (PD&E) Study from County Road 532 to South of Sinclair Road |
| County: | Osceola |
| FM Number: | 44878-1-22-01 |
| Federal Aid Project No: | N/A |
| Brief Project Description: | Osceola County is conducting a Project Development and Environment (PD&E) study to evaluate the widening of Old Lake Wilson Road/County Road 545 (CR 545) from two to four lanes. The total project length is approximately 2.5 miles. The study includes capacity improvements along the roadway and at intersections, a new bridge over Interstate 4 (I-4), the addition of a median, and bicycle and pedestrian features. |

PART 2: DETERMINATION OF WQIE SCOPE

Does project discharge to surface or groundwater? Yes No

Project discharges to various creeks, tributaries, and wet ponds with potentiometric connection to groundwater.

Does project alter the drainage system? Yes No

Project currently flows untreated through open systems. Closed conveyance systems will be constructed to convey runoff to existing stormwater management facilities.

Is the project located within a permitted MS4? Yes No

Name: Osceola County (FLR04E012)

If the answers to the questions above are no, complete the applicable sections of Part 3 and 4, and then check Box A in Part 5.

PART 3: PROJECT BASIN AND RECEIVING WATER CHARACTERISTICS

Surface Water

Receiving water names:

*Davenport Creek;
Unnamed Tributary;
Permitted SMF Ponds*

Water Management District:

SFWMD

Environmental Look Around meeting date: ___/___/___

N/A – treatment to be provided in existing permitted facilities

Water Control District Name(s) (list all that apply):

N/A

Groundwater

Sole Source Aquifer (SSA)? Yes No Name Biscayne Sole Source Aquifer
Streamflow and Recharge Zones
If yes, complete Part 5, D and complete SSA Checklist from EPA website ([Figure 11-1](#))

Other Aquifer? Yes No Name _____

Springs vents? Yes No Name _____

Well head protection area? Yes No Name _____

Groundwater recharge? Yes No Name _____

Notify District Drainage Engineer if karst conditions are expected or if a higher level of treatment may be needed due to a project being located within a WBID verified as Impaired in accordance with Chapter 62-303, F.A.C.

Date of notification: ___/___/___

PART 4: WATER QUALITY CRITERIA

List all WBIDs and all parameters for which a WBID has been verified impaired or has a TMDL in **Table 1**. This information should be updated during each re-evaluation as required.

Note: If BMAP or RAP has been identified in **Table 1**, **Table 2** must also be completed. *Attach notes or minutes from all coordination meetings identified in **Table 2**.*

EST recommendations confirmed with agencies? Yes No

BMAP Stakeholders contacted? Yes No

TMDL program contacted? Yes No

RAP Stakeholders contacted? Yes No

Regional water quality projects identified in the ELA? Yes No

If yes, describe:

Potential direct effects associated with project construction and/or operation identified? Yes No

If yes, describe:

Discuss any other relevant information related to water quality including Regulatory Agency Water Quality Requirements.

Environmental Resource Permitting will be required, including the modification of existing permits which included theoretical future roadway basin characteristics to reflect the final design conditions. Treatment will be required for all new impervious surface, and the current conditions of the existing permitted ponds verified through inspection and/or survey of the stormwater management facilities as necessary.

PART 5: WQIE DOCUMENTATION

- A. No involvement with water quality
- B. No water quality regulatory requirements apply.
- C. Water quality regulatory requirements apply to this project (provide Evaluator's information below). Water quality and stormwater issues will be mitigated through compliance with the design requirements of authorized regulatory agencies.
- D. EPA Ground/Drinking Water Branch review required. Yes No
Concurrence received?
If Yes, Date of EPA Concurrence: ____/____/____ (Attach the concurrence letter)

The environmental review, consultation, and other actions required by applicable state and federal environmental laws for this project are being, or have been, carried out by Osceola County.

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| Evaluator Name (print): Michael A. Holt | |
| Title: Senior Drainage Engineer | |
| Signature: <i>Michael A. Holt</i> | Date: 09/14/2022 |

